PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		TYF	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS							R	ATE -	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE		OR	BASIC FEE	860
то	TAL CHARGEA	BLE CLAIMS	18 minus 20=		*		X	\$ 9=		OR	X\$18=	,
INDEPENDENT CLAIMS			(mi	nus 3 =	*		×	40=		OR	X80=	-
MULTIPLE DEPENDENT CLAIM PRESEI							+	35=		OR	+270=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	TC)TAL	. Ng]	TOTAL	860
CLAIMS AS AMENDED					PART II						OTHER	THAN
	O.	(Column 1)	(Column 2)			(Column 3)	7			OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 18	Minus	D() .	= 0	×	\$ 9=		OR	X\$18=	X ,
	Independent	•	Minus ***			=				OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT CLAIM				35=	40° 7 1/24	OR	+270=		
								TOTAL			TOTAL	
								T. FEE	!	OR	ADDIT. FEE	796
_		(Column 1) CLAIMS	(Column 2) (Column 3) HIGHEST						ADDI			ADDI 64
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI-® TIONAL FEE
	Total	*	Minus	**		= .	X	9=	,	OR	X\$18=	
	Independent	*	Minus	***		=	X	40=	[10 F)	OR	X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		+1	35=	,	OR	+270=	÷.
							<u> </u>	TOTAL			TOTAL ADDIT, FEE	\$ 1. g/d
		. (Oaluman 4)		/Calu	~~ O\	(Column 3)	ADDI	T. FEE			AUDII. FEEI	10 00 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		(Column 1) CLAIMS		(Colui	IEST		·	ADDI-	* ;		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	R/	ATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=	X	9=	2" T.A. 33	OR	X\$18=	
	Independent	*	Minus	***		=	-X	40=			X80=	
	FIRST PRESE	ULTIPLE DEPENDENT		CLAIM		7,40=		·	OR		_ 1	
	A Mills and the selection of the least the selection of t									OR	+270=	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is I ss than 20, enter "20." ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											4.5	
		mber Previously P aber Previously Pa						,	propriate box	c in co	lumn 1.	